

Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

****Enter the email address for this business entity to be used for future
annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
3205 GROVE TIGERTAIL HOLDINGS, LLC**

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 04 |
| Estimated Charge | \$155.00 |

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COVER LETTER

H24000287139

**TO: New Filing Section
Division of Corporations**

SUBJECT: 3205 GROVE TIGERTAIL HOLDINGS, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JAVIER LLUCH

Name of Person

Firm/Company

3006 AVIATION AVE STE 2-A

Address

MIAMI, FL, 33131

City/State and Zip Code

javierlluch@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAVIER LLUCH at (800) 460-9727
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

3205 GROVE TIGERTAIL HOLDINGS, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:3205 GROVE TIGERTAIL HOLDINGS, LLC3006 AVIATION AVE STE 2-AMIAMI, FL, 33131Mailing Address:3205 GROVE TIGERTAIL HOLDINGS, LI3006 AVIATION AVE STE 2-AMIAMI, FL, 33131**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Capitol Corporate Services, Inc.

Name

515 E. Park Avenue, 2nd FLFlorida street address (P.O. Box **NOT** acceptable)Tallahassee

City

FL

State

32301

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Kim Tadlock

Kim Tadlock, as Asst. Secretary on behalf of

Capitol Corporate Services, Inc.

Registered Agent's Signature (REQUIRED)

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